Case 2:18-cv-00512 Document 1 Filed 03/30/18 Page 1 of 8 Page 1

## UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF WEST VIRGINIA



Tessy	W. Smith	3508054
	ve the full name of the plaintiff in this action).	(Inmate Reg. # of each Plaintiff)
VERSUS	VERSUS  CIVIL ACTION NO. 2, 18 - 0512  (Number to be assigned by Court)	
Sauch	Central Regional Jail	<del></del>
	e the full name of the defendant its in this action)	
	COMPLA	AINT
I. Prev	ious Lawsuits	
A.		state or federal court dealing with the same nerwise relating to your imprisonment?
	Yes _ {	No

<b>.</b>	If your answer to A is yes, describe each lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same outline).		
	1.	Parties to this previous lawsuit:	
		Plaintiffs: Lessy W. Smith	
		Defendants: South Control Regional Jail	
	2.	Court (if federal court, name the district; if state court, name the county);	
		County	
	3.	Docket Number: 1:18-00-0438	
	4.	Name of judge to whom case was assigned:	
Dewayne Tinsley		Dewayne Tinsley	
	5.	Disposition (for example: Was the case dismissed? Was it appealed is it still pending?	
	6.	Approximate date of filing lawsuit: 3-13-18	
	7.	Approximate date of disposition: n of	

II.	Plac	Place of Present Confinement: South Central Rajonal Tall		
	A.	Is there a prisoner grievance procedure in this institution?		
		Yes No		
	В.	Did you present the facts relating to your complaint in the state prisoner grievance procedure?		
		Yes No		
	C. If you answer is YES:			
		1. What steps did you take? ASKAD (speatedly for formas)		
		Cliffers.		
		2. What was the result? Nothing at all		
	D.	If your answer is NO, explain why not:		
III.	Part	ies		
	and p	em A below, place your name and inmate registration number in the first blank place your present address in the second blank. Do the same for additional tiffs, if any.)		
	A.	Name of Plaintiff: Mr. SMith		
		Address: 1001 Centre Way S. Chas. w. 25309		
	B.	Additional Plaintiff(s) and Address(es):		

(In item C below, place the full name of the defendant in the first blank, his/her official position in the second blank, and his/her place of employment in the third

	Use item D for the names, positions, and places of employment of any onal defendants.)
C.	Defendant: SclT
	is employed as:
	at 1001 Centre Way 5. Chas. Wv. 25309
D.	Additional defendants:
State	ment of Claim
is invenous is invenous inventor invent	here as briefly as possible the <u>facts</u> of your case. Describe how each defendant olved. Include also the names of other persons involved, dates and places. Do ive any legal arguments or cite any cases or statutes. If you intend to allege a per of related claims, set forth each claim in a separate paragraph. (Use as much as you need. Attach extra sheets if necessary.)
h	ad sepertedly asked for nail clippers
<u>Ace</u>	my fingernails and toerails in mended
M	ed bodly One day. I was putting on
<u>_</u> 5	ocks and felt exerciating fair on My
11	toe, When I removed my left Socie,
	renail was honging off and bleeding
ofusa	elye

IV.

IV.	Statement of Claim (continued):
***************************************	
V.	Relief
	State briefly exactly what you want the court to do for you. Make no legal arguments Cite no cases or statutes.
I	would like to be compensated for my pain
QΛ	would like to be compensated for my pain d Suffering and would also like for other
M	natis hails to be cared for.
·	
***************************************	

V.	Relie	Relief (continued)):		
<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>				
VII.	Cou	nsel		
	A.	If someone other than a lawyer is assisting you in preparing this case, state the person's name:		
	В.	Have you made any effort to contact a private lawyer to determine if he or she would represent you in this civil action?		
		Yes No		
		If so, state the name(s) and address(es) of each lawyer contacted:		
		If not, state your reasons: don't know who to contact.		
		If not, state your reasons: (100 + Know who to Contract,		
	C.	Have you previously had a lawyer representing you in a civil action in this court?		
		Yes No		

If so, state the lawy	ver's name and address:
Signed thisda	y of <u>March</u> , 20 <u>18</u> .
	Signature of Plaintiff or Plaintiffs
I declare under penalty of perjury  Executed on 3-26-18 (Date)	that the foregoing is true and correct.
(Date)	Deug Smith
	Signature of Movant/Plaintiff
Signature of Attorney (if any)	